

Logic model matrix

Component 1: Develop networks to connect identified children to hub sites and to a health care home.						
	Resources	Activities		Outputs	Outcomes	Impact
Description	<ul style="list-style-type: none">Hub sites in Seattle, Kent and RedmondCommunity Based Organizations (CBO's): child care providers, schools, WIC, head startCBO site referral mechanismOutreach workersHub site coordinatorsProject Manager	<ul style="list-style-type: none">Hub sites establish working contracts with KGCCBO staff identify children in local community in need of careCBO staff develop mechanisms for delivering and referring preventive services to childrenOutreach workers sustain contact networks with CBO'sHub site coordinators make links with CBO's and coordinate referrals to health care homes and needed specialists <p>Project Manager provides oversight for Hub site coordinators and acts as liaison for Hub Sites and KGC Program</p>		<ul style="list-style-type: none">Working Hub sitesSustained network linkages with CBO'sEffective leadership and community coordination by Project Manager and Site Coordinators	<ul style="list-style-type: none">3,000 children connected to needed services in each hub site community by the end of the year	Coordinate preventive care for all kids through community networks and connect kids to health care home
Assumptions	<ul style="list-style-type: none">Hub sites have service capacityCBO's have referral capacityOutreach workers present and accessibleFirst year funding is available for Project Manager and Site Coordinators and sources of sustained funding will be identified	<ul style="list-style-type: none">Hub Sites are willing to participateLocal population is in need of a health care homePotential to link CBO's with Hub SitesAll staff have sufficient resources and support to perform dutiesCHILD Profile is in place and being used among network professionals	<ul style="list-style-type: none">Hub Sites and CBO's successfully identify kidsLinks are effective in connecting kids to local resourcesFollow up with kids occursCHILD Profile meets needs of providers and serves as useful tracking tool	<ul style="list-style-type: none">Kids identified through networkResources and support are maintained throughout first year	<ul style="list-style-type: none">Networks among hub sites, CBO's and outreach workers effective and actively utilized	

Measures of Success		<ul style="list-style-type: none"> • 3 established hub sites • Approximately 9 sustained CBO's (3 per hub site) • CHILD Profile screening and tracking records from each hub site • Records of Project Manager and Site Coordinators. 	<ul style="list-style-type: none"> • Number of children screened at hub sites and referred to specialized services • Number of community network links made by outreach workers • Number of referrals coordinated by hub site Coordinators and Project Manager 	<ul style="list-style-type: none"> • The number of children enrolled in a health care home in each hub site community has increased at end of first year 	<ul style="list-style-type: none"> • Increased connection to health care home over time • Comparison with community benchmarks
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Component 2: Train professionals in the network how to screen children for physical, oral and developmental health.					
	Resources	Activities	Outputs	Outcomes	Impact
Description	<ul style="list-style-type: none"> • 3 Technical Consultants • 3 Technical Advisory Groups • Project Manager and Site coordinators • Executive Committee 	<ul style="list-style-type: none"> • Develop curriculum for trainings in each content area, provide training and perform quality review • Technical Advisory Groups will advise technical consultants on oral health, physical health and developmental health trainings • Organize trainings and assist Technical Consultants and Technical Advisory Groups • Provide oversight 	<ul style="list-style-type: none"> • Comprehensive training curriculum for each content area • Quality review mechanism for effectiveness of training models. • 100 network professionals (CBO, hub site staff and healthcare providers) trained to screen children. 	<ul style="list-style-type: none"> • Network professionals cross-trained to screen 5,000 kids in three content areas in first year • Screening system in place among community networks 	<ul style="list-style-type: none"> • Kids receive comprehensive screening from cross-trained network professional and healthcare providers—early detection of preventive care needs in place
Assumptions	<ul style="list-style-type: none"> • Technical consultants and advisory groups have expertise and sufficient resources to participate • A need for training exists 	<ul style="list-style-type: none"> • Technical consultants have sufficient skill base • Effective working relationship between technical consultants and advisors • Hub site and CBO staff have free time to attend trainings 	<ul style="list-style-type: none"> • Network professionals committed to training and understand guidelines and models • Technical consultants convey guidelines clearly to trainees 	<ul style="list-style-type: none"> • Resources in place to support screening system 	<ul style="list-style-type: none"> • Cross-training supported by network professionals • Funding in place for cross-training
Measures of Success	<ul style="list-style-type: none"> • Consultants, advisory groups, and other staff in place for duration of project. 	<ul style="list-style-type: none"> • Number of staff trained • Quality review reports 	<ul style="list-style-type: none"> • Number of staff actively screening kids 	<ul style="list-style-type: none"> • Trained professionals reach screening target of 5,000 in first year 	<ul style="list-style-type: none"> • Number of kids screened

Component 3: Trained teams of professionals will refer screened children to needed services and utilize CHILD Profile registry to track the preventive screening services and referrals received by the target population.					
	Resources	Activities	Outputs	Outcomes	Impact
Description	<ul style="list-style-type: none"> • Hub Sites • Trained CBO staff, outreach workers and healthcare providers • Preventive care sites • CHILD Profile 	<ul style="list-style-type: none"> • Hub sites refer children to preventive care sites for treatment • Children are referred to Hub sites by CBO's, outreach workers and healthcare providers for more screening. • CHILD Profile tracks screening, referrals and follow-up care 	<ul style="list-style-type: none"> • Referral mechanism for community network • Early detection and response to needed preventive care • Tracking system in place through expanded CHILD Profile. 	<ul style="list-style-type: none"> • 3,000 kids referred to a hub site for placement into a health care home by end of first year • Kids begin to receive coordinated care 	<ul style="list-style-type: none"> • All kids have a health care home in the future
Assumptions	<ul style="list-style-type: none"> • Staff is trained • Kids need preventive care • Preventive care sites are accessible and willing to participate • CHILD Profile 	<ul style="list-style-type: none"> • Professional staff is trained to screen, identify needs and make referrals • Preventive care sites have service capacity • Professional staff is trained to use Child Profile • CHILD Profile has capacity to expand 	<ul style="list-style-type: none"> • Referrals are made to hub site • Links are established with preventive care providers • Resources and funding in place to expand CHILD Profile to track preventive interventions 	<ul style="list-style-type: none"> • Funding and resources remain in place • Professional staff continue to be trained in screening, referral and tracking 	<ul style="list-style-type: none"> • Trained teams of professionals identify needed preventive care for kids and use CHILD Profile as tracking devise
Measures of Success	<ul style="list-style-type: none"> • Kids are identified as needing care. • Kids are enrolled and tracked in their health care home 	<ul style="list-style-type: none"> • Kids are enrolled in a health care home • Trained staff reporting regular contact with kids • Screening and enrollment targets are met 	<ul style="list-style-type: none"> • Number of kids referred to hub sites • Number of kids referred to preventive care providers • Number of kids tracked through CHILD Profile 	<ul style="list-style-type: none"> • Meet target number of 3,000 for referring kids • Hub site and CBO screening and tracking records 	<ul style="list-style-type: none"> • 3,000 kids receive referrals and are actively tracked in network system by end of first year

Component 4: Children will be enrolled in insurance programs if currently uninsured through web-based medical insurance application to streamline procedures.					
	Resources	Activities	Outputs	Outcomes	Impact
Description	<ul style="list-style-type: none"> Available network professionals CHAP Web-based system 	<ul style="list-style-type: none"> Enroll and/or assist families with enrollment in public assistance programs through web-based system Web-based system will be expanded to serve KGC target population 	<ul style="list-style-type: none"> Expanded web-based enrollment system for use among network professionals and families in hub site communities 	<ul style="list-style-type: none"> Streamlined enrollment process User friendly enrollment system 	<ul style="list-style-type: none"> Uninsured kids are insured Web-based system becomes a common mechanism for enrolling kids in public assistance programs
Assumptions	<ul style="list-style-type: none"> Web-based system is operational, publicized and accessible to target population. CHAP is established enrollment resource for target population 	<ul style="list-style-type: none"> Kids are identified as uninsured Web-base system is expandable 	<ul style="list-style-type: none"> Web base system is accessible and has been expanded in time to meet KGC project lift-off 	<ul style="list-style-type: none"> Web-based enrollment system is easy to use 	<ul style="list-style-type: none"> Families find system user friendly Families actively use web-based system to enroll kids
Measures of Success	<ul style="list-style-type: none"> 	<ul style="list-style-type: none"> Number of kids enrolled 	<ul style="list-style-type: none"> Number of people accessing web-based system 	<ul style="list-style-type: none"> Increased number of kids enrolled in public assistance programs 	<ul style="list-style-type: none"> Number of families using system